

Youth Led Grants Application Form

Form Preview

Applicant Details

* indicates a required field

Applicant *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Birth

Must be a date.

Briefly describe yourself.

*

Word count:

Must be no more than 200 words.

Applicant Postal Address

*

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Mobile

Must be an Australian phone number. Please use the following number-spacing format "0412 345 678"

Email *

Must be an email address.

Auspicing Organisation Details

Auspice Organisation Name *

Organisation Name

ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register

ABN

Entity name

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ABN status
Entity type
Goods & Services Tax (GST)
DGR Endorsed
ATO Charity Type More information
ACNC Registration
Tax Concessions
Main business location

Please make sure that the Entity name (or a registered trading name) matches the auspice organisation name. ABN status must be "Active".

Contact Name *	Title	First Name	Last Name
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Position	<input type="text"/>		
Auspice Postal Address *	Address		
	<input type="text"/>		
	<input type="text"/>		
Daytime Phone Number *	03 <input type="text"/>		
	Must be an Australian phone number. Please use the following number-spacing format "03 9123 4567"		
Mobile	<input type="text"/>		
	Must be an Australian phone number. Must be an Australian phone number. Please use the following number-spacing format "0412 345 678"		
Email Address *	<input type="text"/>		
	Must be an email address.		

Project Details

* indicates a required field

Project Name *	<input type="text"/>
	Must be no more than 15 words

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Brief project description.
Please include the project aims, the location, amount of participants, timelines, and any other key information. *

Word count:

Must be no more than 500 words.

Start date of project *

Must be a date and no earlier than 1/8/2024.

End date of project *

Must be a date and no later than 31/12/2025.

Must be a date

Community Engagement

*** indicates a required field**

What are the primary areas of focus for this project/program?

You may select up to five items. You can select items from any area of the list – all have equal value. Only select sub-categories if you want to be more specific. In this question we want to know about the field of work (e.g. arts, sport, health), rather than the types of people it will affect (e.g. young people, refugees). To add further classifications, click in a blank area of the answer box.

Who are the expected primary beneficiaries of this project/program?

Please choose only the group/s that are at the very core of this project/program. If your initiative is open to everyone, choose the first item, 'Universal – no particularly targeted beneficiaries'. To add further beneficiaries click in a blank area of the answer box.

What is the need for this project?

Will you be using volunteers? *

☐ Yes ☐ No

If yes, what roles will they be playing in the project?

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Will your project address gender inequality? *

☐ Yes

☐ No

☐ Don't Know

Answer 'yes' if your project/program is specifically designed to improve opportunities for women and girls, or you think this may occur as a side-benefit to your initiative.

How will your initiative address gender inequality?

What will you do to address gender inequality and what changes do you expect will occur as a result?

Outcomes

Please tell us about the outcomes you expect to result from your project. Outcomes are the changes you expect to occur for the beneficiaries (direct, indirect and/or intermediaries) of your project.

We have made a list of outcomes that relate to our priorities, these are explained in the grant guidelines.

Please select from our list outcomes that you feel align with your project.

Your outcomes

Alignment with our outcomes

Explanatory notes

What changes do you expect will occur as a result of your project (e.g. Enhanced physical fitness)? Please be brief. One per row.	Which of our outcomes will your project contribute to? If multiple apply pick the most relevant. No more than 1 choice may be selected.	Add notes if you need to provide more context.

Our metrics

Below is a list of metrics. These are questions that will help us measure the progress we make in addressing our priorities. Please select some metrics that will apply to your project. Should you be successful in your grant application we will ask you to gather this information and report your answer in the Acquittal at the end of your project.

Metric

Which of our metrics (if any) will you track? You may be required to report on your progress. Add more rows if you want to list additional metrics. No more than 1 choice may be selected.

Child Safety Standards

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Appropriate documentation might include a copy of relevant Working With Children Checks and your organization's Child Safety Policy or Statement of Commitment to Child Safety.

If needed, DFFH provides a template for a [Statement of Commitment to Child Safety](#).

Working with Children Checks can be obtained from the [Working with Children Check Victoria Website](#). Note: there is no fee for checks for volunteers.

The [Do I need a Check?](#) quiz helps you confirm whether you need a working with children check.

Are you aware of the changes to the Victorian Government's Child Safety Standards? *

☐ Yes

☐ No

Information about the new Child Safety Standards available at <https://ccyp.vic.gov.au/child-safety/>

Please attach documentation on how you are addressing these standards *

Attach a file:

Budget

* indicates a required field

Budget Template

Add more rows as needed. Unnecessary rows can be left blank or deleted.

Column totals will be automatically generated.

Please note: funding is limited from \$100 to \$3,000 per application.

Please ensure the budget is as realistic and detailed as possible. The amount being requested should be included in the budget as cash income.

This budget should cover the costs of the project as a whole and not just the expenses funded by the Yarra Grant.

The budget should balance, to demonstrate that the project is viable and not being run at a profit.

Example cash income items might include:

- This Yarra Grant,
- Other grant funding,
- Internal funds,
- Fundraising/Donations,
- Ticket Sales, or

Example cash expenditure items might include:

- Staff costs (specific to the funded activities only),
- Grant management fee (auspiced applications only),
- Venue hire (not including Council Facility Subsidy applications),

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- Commercial sponsorship contributions.
- Phone/stationary/postage,
- Materials,
- Equipment
- Catering
- Transport

Income	Confirmed?	\$	Expenditure	\$
Yarra Grant		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$

Cash Budget Totals

Cash Income Amount

\$

This number/amount is calculated.

Cash Expenditure Amount

\$

This number/amount is calculated.

**Amount requested from
City of Yarra? ***

\$

Must be a whole dollar amount between \$100 and \$3,000

**Which item/s of
expenditure will the
grant be used for? ***

If you are successful, you will be required to provide receipts for the nominated items.

Applicant Declaration

I declare to the best of my knowledge that all the details supplied in this application form and in the attached documents are true and correct. I have read the accompanying guidelines and information to applicants provided with this application form. Yarra City Council will be contacted immediately if any information provided in this application changes or is incorrect.

I consent to the information provided in relation to this application being collected, used and disclosed by the Yarra City Council for the purpose of registering, administering and promoting my current and any future grant applications with the Yarra City Council. I understand that copies of all material provided will be retained by Council as required by the Public Records Act 1973.

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I consent to my contact details being added to the [Yarra Community Grants and Training Opportunities Mailing List](#). By signing up to this mailing list I will regularly be sent information on: Council's grants programs; Council's skills and training programs; and other opportunities relevant to the majority of our local community.

I agree

Title

First Name

Last Name

Feedback

We strive to constantly improve the grants program, and we value applicant feedback about the grants program and the process of applying for a grant in order to do this. Leaving feedback is completely optional.

Do you have any suggestions for how the Small Project Grants Program could be improved?

How easy did you find this application process to follow?

How long did it take you to complete your application?

Do you have any further comments?

Submitting your Application

Applications are not submitted until you hit the **submit** button on the next page.

Once your application has been submitted it cannot be changed so please ensure it is accurate and complete before you submit it.

When you submit your application you will receive an automated email acknowledging receipt of your application with a PDF copy of your application attached. This will be sent to the email address you used to register. If you do not receive this confirmation email your application has not been submitted.

You can return to <http://cityofyarra.smartygrants.com.au/> at any time to view your applications.

Reminder: If you have received previous funding from Yarra City Council and the project is **completed** please ensure you have submitted any outstanding Acquittal Forms.

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Acquittal forms are linked to your Small Project Grant applications in the "My Submissions" area of SmartyGrants. To submit an acquittal form please log onto <http://cityofyarra.smartygrants.com.au>, click on "My Submissions" and submit it in the same way you submitted your grant application.

Any outstanding acquittals need to be submitted for new grant applications to be eligible.